

County of Gloucester  
Human Resources Manual

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<b>CHAPTER:</b>	<b>1 - FUNDAMENTALS</b>	<b>ADOPTED: 11/23/10</b>
<b>SECTION:</b>	<b>3 - MANUAL DISTRIBUTION &amp; REVISIONS</b>	<b>REVISED: 12/15/10</b>

**EXHIBIT B – EMPLOYEE DISTRIBUTION OPTION**

TO: (Department Employees)

FROM: (Department Head)

DATE:

Please be advised that you may opt to receive HR Manual revisions via e-mail or hard-copy paper. Please indicate this preference below and return to (name of employee in charge of distribution) no later than (insert deadline).

I wish to receive the Human Resource Manual and its revisions as indicated below. Furthermore, I understand that, if in the future, I decide that I would rather receive revisions in a different manner, I must notify my department head in writing.

Choose one:

\_\_\_\_\_ E-mail (address: \_\_\_\_\_)

\_\_\_\_\_ Hard-Copy Paper

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date